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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

EASTERN DIVISION

In re:	Schreiner,	Cheryl D	§ S	Case No. 08 B 15963				
	Debtor		§ §					
			§					
	CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT							
				ving Final Report and Account of the b)(1). The trustee declares as follows:				
	1)	The case was filed on 06/20/2	2008.					
	2)	The plan was confirmed on 0	8/21/2008.					
(3) on (NA).	The plan was modified by orc	ler after confir	mation pursuant to 11 U.S.C. § 1329				
I	4) plan on 07/23		nedy default by	the debtor in performance under the				
	5)	The case was dismissed on 07	7/23/2009.					
	6)	Number of months from filing	g or conversion	n to last payment: 9.				

7) Number of months case was pending: 15.

9) Total value of assets exempted: \$6,510.00.

8) Total value of assets abandoned by court order: (NA).

10) Amount of unsecured claims discharged without full payment: \$0.

11) All checks distributed by the trustee relating to this case have cleared the bank.

UST Form 101-13-FR-S (09/01/2009)

Receipts:

Total paid by or on behalf of the debtor \$2,363.00

Less amount refunded to debtor \$0

NET RECEIPTS: \$2,363.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$2,050.00

Court Costs \$0

Trustee Expenses & Compensation \$156.10

Other \$0

TOTAL EXPENSES OF ADMINISTRATION:

\$2,206.10

Attorney fees paid and disclosed by debtor \$1,450.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Internal Revenue Service	Priority	\$2,200.00	\$1,151.52	\$1,151.52	\$156.90	\$0
Cook County Treasurer	Secured	\$0	NA	NA	\$0	\$0
American Family Insurance	Unsecured	\$60.00	NA	NA	\$0	\$0
Commonwealth Edison	Unsecured	\$1,600.00	\$1,486.39	\$1,486.39	\$0	\$0
ECast Settlement Corp	Unsecured	\$7,000.00	\$7,523.92	\$7,523.92	\$0	\$0
Elsevier	Unsecured	\$60.00	NA	NA	\$0	\$0
Endodontic & Periodontic Assoc	Unsecured	\$200.00	NA	NA	\$0	\$0
HSBC Mortgage Services	Unsecured	\$5,800.00	\$5,661.37	\$5,661.37	\$0	\$0
Nicor Gas	Unsecured	\$400.00	NA	NA	\$0	\$0
Palos Community Hospital	Unsecured	\$550.00	NA	NA	\$0	\$0

Summary of Disbursements to Creditors:			
	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$0	\$0	\$0
Mortgage Arrearage	\$0	\$0	\$0
Debt Secured by Vehicle	\$0	\$0	\$0
All Other Secured	\$0	\$0	\$0
TOTAL SECURED:	\$0	\$0	\$0
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0	\$0	\$0
Domestic Support Ongoing	\$0	\$0	\$0
All Other Priority	\$1,151.52	\$156.90	\$0
TOTAL PRIORITY:	\$1,151.52	\$156.90	\$0
GENERAL UNSECURED PAYMENTS:	\$14,671.68	\$0	\$0

Disbursements:					
Expenses of Administration	\$2,206.10				
Disbursements to Creditors	\$156.90				
TOTAL DISBURSEMENTS:		\$2,363.00			

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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Date: September 8, 2009

By: _/s/ MARILYN O. MARSHALL

Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.